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Application Number	10/600086
Filing Date	06/20/2003
First Named Inventor	Joao Jose Cardinali leda
Art Unit	3744
Examiner Name	William E. Tapolcai
Attorney Docket Number	IMALIO ADODUO

I hereby revoke all previous powers of attorney given in the above-identified application A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: 62124 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 62124 OR Firm or Individual Name Address City State Country Telephone Email I am the: \square Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Signature Name Joao Jose Cardinali leda Date Telephone amour 2008 551934299071 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

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